

**PLEASE READ THESE INSTRUCTIONS PRIOR TO COMPLETING THE APPLICATION FOR
SPECIAL RESTRICTED LICENSE APPLICATION FOR 15 YEAR OLDS**

Applicants wishing to obtain an Employment/Education restricted license must meet the following criteria.

- Be at least 15 years old and have successfully completed an approved driver education course
- Hold a permit for at least 6 months
- Log 35 hours of driving with a qualified licensed driver, including 5 hours of night driving
- Complete and submit the supplemental application for a restricted driver's license

Employment Restricted License - This license is intended for applicants who are gainfully employed and have no alternative means of transportation to or from work. Operation for work related activities are allowed. Operation is not allowed for activities beyond the scope of work.

Upon successful completion of the road test, the applicant will be issued a license with the following restriction.

*Restricted from home to work, work to home and in connection with work,
via school if necessary. Not for extracurricular activities.*

Educational Restricted License - This license is intended for a student has no readily available means of transportation to or from school. It will allow the applicant to drive to and from school only. It is not for after school activities unless participation in after school activities is a requirement of graduation. If transportation of any means is provided by the school system, the student is not eligible for this license.

Upon successful completion of the road test, the student will be issued a license with the following restriction.

Restricted from home to school and school to home. Not intended for extracurricular activities.

A person holding a special restricted driver's license may operate beyond the terms of the above restriction(s) when accompanied by a licensed driver who:

- Has held a valid license for the past 2 consecutive years;
- Is at least 20 years of age;
- Is occupying a seat beside the driver, and
- Is licensed to operate the class of vehicle operated by the restricted license holder.

The accompanying operator must adhere to all restrictions applied to the license when functioning as the restricted license holder's accompanying operator.

If you have questions regarding this application, please contact the Bureau of motor Vehicles Examination Section at 207-624-9000 Extension 52119.

SPECIAL RESTRICTED LICENSE APPLICATION FOR 15 YEAR OLDS
(Driver Education Required)

NAME: _____ Date of Birth: _____ Telephone: _____

MAILING ADDRESS: _____

Check the appropriate box for the restricted license you are applying:

- ☐ Restricted Educational License
☐ Restricted Employment License

**You may not apply for a road test unless you have held your instruction permit for 6 months and have completed 35 hours of driving, including 5 hours of night driving.

RESTRICTED EDUCATIONAL LICENSE: Complete this portion only if you are applying for a restricted *educational* license.

1. I hereby attest that I have no readily available alternative means of transportation and that the use of a motor vehicle is necessary for transportation to and from the school I attend. (*Not intended for extracurricular activities*)

Name of School

Signature of Applicant

Notary Public

2. I hereby attest that I am the Parent/Legal Guardian of the above named individual and that he/she has no readily available alternative means of transportation and that the use of a motor vehicle is necessary for transportation to and from the school he/she attends.

Signature of Parent/Legal Guardian

Date

3. I, _____, verify that the above named individual attends
Principal of School

_____ and that there is a lack of readily available means of
Name of School
transportation for him/her to attend this school.

Signature of Principal

Date

Telephone

RESTRICTED EMPLOYMENT LICENSE: Complete this portion only if you are applying for a restricted *employment* license.

4. I hereby attest that I have no readily available alternative means of transportation and that the use of a motor vehicle is necessary for transportation to and from or in connection with my employment.

Place of Employment

Signature of Applicant

Notary Public

5. I hereby attest that I am the Parent/Legal Guardian of the above named individual and that he/she has no readily available alternative means of transportation and that use of a motor vehicle is necessary for transportation to and from or in connection with his/her place of employment.

Signature of Parent/Legal Guardian

Date

6. I, _____, verify that the above named individual is employed by me at:
Employer

Name, Address and Telephone Number of Business

Date